A BRIEF REPORT OF REQUIREMENTS FOR PUBLIC HEALTH NURSES IN EIGHTY-THREE CITIES

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HEN the Provisional Section on Public Health Nursing of the American Public Health Association decided to make a study regarding the qualifications required for superintendents and supervisors in the public and private organizations in the 83 cities which were studied by the Committee on Municipal Health Department Practice, it did not realize the magnitude of the task it was undertaking.

It was somewhat of a surprise when we found 348 organizations listed—an average of 3.7 for each city. The number of organizations listed ranged from fifteen for New York City to two for each of eleven cities, and one each for Kansas City, Kansas, and Oklahoma City, Oklahoma, both of which reported an amalgamation of all nursing activities. After some duplications were eliminated 313 organizations remained to which questionnaires were sent, as all the work had to be done by correspondence.

The committee endeavored to make the questionnaire as short as possible, but as the information which we hoped to secure had to be listed under many headings, the questionnaire contained five pages when completed.

In addition to the questionnaires, 131 follow-up letters were sent asking cooperation in the study by returning the questionnaire promptly. The questionnaires were not returned in sufficient numbers until September 1, when a total of 137 were available.

Inasmuch as time did not allow a detailed classification, the committee are presenting a summary of a part of the questionnaires.

Number and Type of Organizations Reporting.—A total of 137 questionnaires were returned whose data were sufficiently classified to be included in this report. Of the 137, 68 were private organizations and 69 public organizations. Among the private organizations were listed 7 who specialize in infant hygiene and 8 in tuberculosis. The remaining number were mostly visiting nurse associations. Among the 69 public organizations who reported, 50 were boards of health and 16 boards of education, 1 a county organization, and 2 public institutions doing public health nursing.

Number of Organizations Employing an Assistant Director or Assistant Superintendent.—Thirty-one, or 45.5 per cent, of the private organizations employed an assistant, while only 10, or 14.4 per cent, of the public organizations employed an assistant.

Number of Organizations Employing a Supervisor.—Sixty-four, or 94.1 per cent, of the private organizations and 48, or 69.5 per cent, of the public organizations reported the employment of supervisors.

Number of Supervisors Employed.— The number of supervisors employed by the 68 private organizations was 231 and for the 69 public organizations, 166.

The number of supervisors for each organization ranged from one supervisor for each of 32 private and 29 public organizations, to 30 supervisors for one private organization and 18 for one public organization.

Number of Nurses Employed.—The private organizations reported the employment of 1,936 nurses while the public organizations reported the employment of 2,325. The public organizations employed 389 more nurses, and 65 less supervisors.

The Ratio of Supervisors to Nurses.— Counting the total number of supervisors and total number of nurses for each of the private and public organizations, we find that for the private organizations there is 1 supervisor to 8 nurses and for the public organizations 1 supervisor to 14 nurses.

Organizations Reporting No Nurse Supervision.—Three private organizations and 13 public organizations reported no nurse supervision. The private organizations were 3 tuberculosis associations, and the public organizations were 6 boards of health and 7 boards of education. Four and four-tenths per cent of the private organizations reported no nurse supervision, while 18.8 per cent of the public organizations reported no nurse supervision.

Qualifications of the Nurse in Charge.

The questionnaire asked for the qualifications for the superintendent, director or chief. With the exception of a few public organizations who have civil service requirements, and those who reported that no requirements had been established or that requirements would be made if a change in superintendents were necessary, the data returned gave the qualifications of the nurse in the position at the present time. They are as follows:

College Education: Nine, or 13.2 per cent, of the private organizations reported that the nurse in charge has a college education. One, or 1.4 per cent, of the public organizations reported that the nurse in charge has a college education.

High School Education: Forty-four, or 64.7 per cent, of the private organizations reported that the nurse in charge has

a high school education. Thirty-one, or 44.9 per cent, of the public organizations reported that the nurse in charge has a high school education.

Registered Nurses: Sixty-five, or 95.5 per cent, of the private organizations reported the nurse in charge as a registered nurse. Thirty-nine, or 56.5 per cent, of the public organizations reported the nurse in charge as a registered nurse.

Eligibility for Membership in the National Organization for Public Health Nursing.—"Graduation from a training school for nurses connected with a general hospital having a daily average of thirty patients or more and a continuous training in the hospital of not less than two years. Training shall include practical experience in caring for men, women and children, together with the theoretical and practical instruction in medical, surgical, obstetrical, and pediatric nursing. Training may be secured in one or more hospitals. In those states where nurse practice laws have been enacted, registration shall be an additional qualification."

I think we are all agreed that the professional qualifications could not be any lower than the National has put them, and that all public health nurse workers should be able to qualify for membership in this organization. However, it is somewhat surprising to find that this is not the case. Sixty-five, or 95.5 per cent, of the private organizations reported the nurse in charge as eligible for membership, while only 35, or 50.7 per cent, of the public organizations reported the nurse in charge as eligible for membership.

Graduates of Public Health Nurse Course.—A total of 46 reported the nurse in charge as a graduate of a public health nursing course. Thirty-one, or 45.5 per cent, of the 68 private organizations reported that the nurse in charge has had special public health nurse training while 15, or 21.7 per cent, of the 69 public organizations reported that the nurse in

charge has had special training. The length of the course and the number of graduates in each were reported as follows:

	Private	Public
Two years' course	. 2	0
Eight months' course	. 17	3
Four months' course		3
Six weeks' course	. 5	7
Length not stated	. 0	2

Experience Under Nurse Supervision.

—Twenty-seven, or 39.7 per cent, of the private organizations reported the nurse in charge as having had experience in public health nursing under nurse supervision, while 18, or 26 per cent, were reported by public organizations.

Experience Not Under Nurse Supervision.—Seventeen, or 25 per cent, of the private organizations reported the nurse in charge as having had experience not under nurse supervision, while the public organizations reported 6, or 8.6 per cent.

Salaries.—Sixty-three private organizations and 40 public organizations reported the salary of the nurse in charge as follows:

	•	Private	Public
Under \$2000			18
From \$2000 to \$2500 From \$2500 to \$3000			17 5
Over \$3000			ŏ

CONCLUSIONS

It is difficult and unwise also to draw any conclusions from so brief a study, but some facts are so obvious that we cannot overlook them.

- 1. That more adequate supervision is given by private organizations than by the public ones.
- 2. That nurses employed by private organizations have had better preparation educationally, professionally and in public health nurse training and experience than the nurses employed by public organizations.
- 3. That if the nursing personnel in each city and state health department or board of education were coördinated under a single nurse director as is recom-

mended in Dr. Winslow's report, by Dr. Allen Freeman, and others, and then allow the nurse director the same freedom in selecting nurses as is given the directors or superintendents of private organizations, state and city departments would have as high a type of nurse as the private organization.

STATISTICAL SUMMARY

·	rivate	Public
Number of organizations reporting	68	69
Number of organizations employ- ing an assistant director or assist- ant superintendent	31	10
Number of assistants employed	54	24
Number of organizations employ-	٠.	
ing supervisors	64	48
Number of supervisors employed	231	166
Number of nurses employed1	.936	2325
The ratio of nurses to supervisors in the organizations	8 to 1 Sup.	14 to 1 Sup.
Number of organizations reporting no nurse supervision	3	13
Number of organizations reporting bedside nursing in the following branches: General	53	. 19
Tuberculosis	35	18
Other communicable diseases. Prenatal	(3 lmt. 23 35	13
Delivery	22	5
Postnatal	52 40	13 20
Preschool	26 3	11 7
School	3	· 2
Number of organizations doing in- structive work only:		
Tuberculosis	15 12	28 35
Prenatal	31	30
Postnatal	11 24	18 31 27
Infant	17 2	27 44
School	ō ·	3
Qualifications of nurse in charge: Those with college education. Those with high school educa-	9	1
tion	44 65	31 39
tion	65	35
health nursing	31	15
The nurses were graduates of courses as follows:		
Two years' course	2 17	0
Four months' course	7	0 3 3 7 2
Six weeks' course Length not stated	5 0	2
Number reporting experience under nurse supervision	27	18
Experience not under nurse supervision	17	6
The salaries were reported as	11	U
follows: Under \$2000	18	18
From \$2000 From \$2000 to \$2500 From \$2500 to \$3000	17 18	18 17 5
Over \$3000	10	ŏ